## DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Attorney Docket ::	66371
First Named Inventor:	Sharon PELEG
Application Number:	N/A
Filing Date: Concu	urrently Herewith
Group Art Unit:	N/A

N/A

☐ Declaration ☐ Declaration
Submitted ☐ Submitted
With ☐ After
Initial ☐ Initial
Filing ☐ Filing

) Examiner Name:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## DIFFERENCE EXTRACTION BETWEEN TWO VERSIONS OF DATA-TABLES CONTAINING INTRA-REFERENCES

(Title of Invention)

The specification of which:

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 (X) is attached hereto, or

As a below named inventor, I hereby declare that:

( )	was filed by an authorized person on my behalf on	
	as United States Application Number	(Date)
	or PCT International Application Number	
	and was amended on (if applicable)	•
	(Date)	

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and I have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application, on this invention filed by me or my legal representatives or assigns and having a filing date before that of the application on which priority is claimed:

•			~		
Prior Foreign		<b></b>	Pari and to	Certif	
Application		Foreign	Priority	Copy Att	ached
Number(s)	Country	<u> Filing Date</u>	Not Claimed	<u>Yes</u>	No_
IL No. 125845	Israel	19 August 1998			$\boxtimes$
IL No. 125846	Israel	19 August 1998			$\boxtimes$
		•			
•					. $\square$

 $\hfill\square$  Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

Provisional Application	Provisional Application
Number(s)	Filing Date

Additional provisional application numbers are listed on a supplemental priority data sheet attached hereto.

hereby claim the benefit under Title 35, United States Code, §120, of any prior United States application(s), or under §365(c) of any PCT intermational application(s) designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT intermational application(s) in the manner provided by the first paragraph of Ritle 35, United States Code, §112, I acknowledge the duty to disclose all information known by me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, which became available between the filing date of the prior application(s) and the national or ECT international filing date of this application:

Filing Date of
Prior PCT U.S. or PCT
Prior U.S. International International Patent Number
Application Number Application Number Application (if applicable)

□ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the practitioners associated with Customer Number 22242, with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, and request that all correspondence and telephone calls in respect to this application be directed to FITCH, EVEN, TABIN & FLANNERY, Suite 1600, 120 South LaSalle

Street, Chicago, Illinois 60603-3406, Telephone No. (312) 577-7000, Facsimile No. (312) 577-7007, CUSTOMER NUMBER 22242.



I hereby declare that all statements made herein of my own knowledge are true, and that all statements made herein on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity or enforceability of the application or any patent issued thereon.

Inventor's signature:  Date:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:	Full name of sole or one	
The properties of the content of the	joint inventor:	
Pate:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:  Ramat Hasharon, Israel (City and Country for others)  58 Bialik Street  Ramat Hasharon 47205, Israel  Ramat Hasharon 47205, Israel  Gitizenship:  Israel  Full name of sole or one joint inventor:  (Given names first, with Family name last)  Inventor's signature:  Date:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:		(Given names first, with Family name last)
Post Office Address:    Samat Hasharon 47205, Israel	Thventor's signature:	
Post Office Address:    Samat Hasharon 47205, Israel	Date:	
Post Office Address:    Samat Hasharon 47205, Israel	Residence:	
Post Office Address:    Samat Hasharon 47205, Israel		City and State for U.S. Residents; City and Country for others)
Full name of sole or one joint inventor:  (Given names first, with Family name last)  Inventor's signature:  Date:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:	Post Office Address.	58 Bialik Street
Full name of sole or one joint inventor:  (Given names first, with Family name last)  Inventor's signature:  Date:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:	## ##	Ramat Hasharon 47205, Israel
Full name of sole or one joint inventor:  (Given names first, with Family name last)  Inventor's signature:  Date:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:		
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joint inventor:  (Given names first, with Family name last)  Inventor's signature:  Date:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:	Gtizenship:	ISTael
(Given names first, with Family name last)  Inventor's signature:  Date:  Residence:  (City and State for U.S. Residents; City and Country for others)  Post Office Address:		
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